

B1 (Official Form 1)(1/08)

United States Bankruptcy Court Northern District of Illinois					Voluntary Petition														
Name of Debtor (if individual, enter Last, First, Middle): Marchese, Daniel P.					Name of Joint Debtor (Spouse) (Last, First, Middle): Marchese, Michele L.														
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): AKA Dan Marchese					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): AKA Michele Lynne Sadler; AKA Michele Lynne Flemming														
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-7480					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-2528														
Street Address of Debtor (No. and Street, City, and State): 25914 W. Rollins road Ingleside, IL <div>ZIP Code 60041</div>					Street Address of Joint Debtor (No. and Street, City, and State): 25914 W. Rollins road Ingleside, IL <div>ZIP Code 60041</div>														
County of Residence or of the Principal Place of Business: Lake					County of Residence or of the Principal Place of Business: Lake														
Mailing Address of Debtor (if different from street address): <div>ZIP Code</div>					Mailing Address of Joint Debtor (if different from street address): <div>ZIP Code</div>														
Location of Principal Assets of Business Debtor (if different from street address above):																			
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)			Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.													
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).														
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY														
Estimated Number of Creditors <table><tr><td><input type="checkbox"/> 1-49</td><td><input type="checkbox"/> 50-99</td><td><input checked="" type="checkbox"/> 100-199</td><td><input type="checkbox"/> 200-999</td><td><input type="checkbox"/> 1,000-5,000</td><td><input type="checkbox"/> 5,001-10,000</td><td><input type="checkbox"/> 10,001-25,000</td><td><input type="checkbox"/> 25,001-50,000</td><td><input type="checkbox"/> 50,001-100,000</td><td><input type="checkbox"/> OVER 100,000</td></tr></table>										<input type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input checked="" type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000
<input type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input checked="" type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000						<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000					
Estimated Assets <table><tr><td><input checked="" type="checkbox"/> \$0 to \$50,000</td><td><input type="checkbox"/> \$50,001 to \$100,000</td><td><input type="checkbox"/> \$100,001 to \$500,000</td><td><input type="checkbox"/> \$500,001 to \$1 million</td><td><input type="checkbox"/> \$1,000,001 to \$10 million</td><td><input type="checkbox"/> \$10,000,001 to \$50 million</td><td><input type="checkbox"/> \$50,000,001 to \$100 million</td><td><input type="checkbox"/> \$100,000,001 to \$500 million</td><td><input type="checkbox"/> \$500,000,001 to \$1 billion</td><td><input type="checkbox"/> More than \$1 billion</td></tr></table>										<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion
<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion										
Estimated Liabilities <table><tr><td><input type="checkbox"/> \$0 to \$50,000</td><td><input type="checkbox"/> \$50,001 to \$100,000</td><td><input checked="" type="checkbox"/> \$100,001 to \$500,000</td><td><input type="checkbox"/> \$500,001 to \$1 million</td><td><input type="checkbox"/> \$1,000,001 to \$10 million</td><td><input type="checkbox"/> \$10,000,001 to \$50 million</td><td><input type="checkbox"/> \$50,000,001 to \$100 million</td><td><input type="checkbox"/> \$100,000,001 to \$500 million</td><td><input type="checkbox"/> \$500,000,001 to \$1 billion</td><td><input type="checkbox"/> More than \$1 billion</td></tr></table>					<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion					
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B1 (Official Form 1)(1/08)

Page 2

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Marchese, Daniel P.**Marchese, Michele L.****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

- None -

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ David M. Siegel**July 23, 2008**

Signature of Attorney for Debtor(s)

(Date)

David M. Siegel**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)_____
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Marchese, Daniel P.

Marchese, Michele L.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Daniel P. Marchese

Signature of Debtor **Daniel P. Marchese**

X /s/ Michele L. Marchese

Signature of Joint Debtor **Michele L. Marchese**

Telephone Number (If not represented by attorney)

July 23, 2008

Date

Signature of Attorney*

X /s/ David M. Siegel

Signature of Attorney for Debtor(s)

David M. Siegel #06207611

Printed Name of Attorney for Debtor(s)

David M. Siegel & Associates

Firm Name

**790 Chaddick Drive
Wheeling, IL 60090**

Address

(847) 520-8100

Telephone Number

July 23, 2008

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Official Form 1, Exhibit D (10/06)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Daniel P. Marchese
Michele L. Marchese**

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]* _____

Official Form 1, Exh. D (10/06) - Cont.

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Daniel P. Marchese
Daniel P. Marchese

Date: July 23, 2008

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court
Northern District of Illinois

In re Daniel P. Marchese
Michele L. Marchese

Debtor(s)

Case No.
Chapter

7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]* _____

Official Form 1, Exh. D (10/06) - Cont.

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Michele L. Marchese
Michele L. Marchese

Date: July 23, 2008

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Northern District of Illinois

In re **Daniel P. Marchese,**
Michele L. Marchese

Debtors

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	6,837.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	24		141,690.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,021.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,021.00
Total Number of Sheets of ALL Schedules		36			
Total Assets			6,837.00		
Total Liabilities				141,690.00	

United States Bankruptcy Court
Northern District of Illinois

In re **Daniel P. Marchese,**
Michele L. Marchese

Debtors

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	9,858.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	9,858.00

State the following:

Average Income (from Schedule I, Line 16)	2,021.00
Average Expenses (from Schedule J, Line 18)	2,021.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,271.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		141,690.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		141,690.00

B6A (Official Form 6A) (12/07)

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
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None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Great Lakes Credit Union Savings Account	J	62.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Security Deposit	J	950.00
4. Household goods and furnishings, including audio, video, and computer equipment.		T.V., Furniture	J	3,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Normal Apparel	J	800.00
7. Furs and jewelry.		Furs, Expensive Clothing and Jewelry	J	800.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

Sub-Total > **5,612.00**
(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

Sub-Total > **0.00**
(Total of this page)

Sheet 1 of 2 continuation sheets attached
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1992 Mercury Sable Wagon	J	1,225.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > **1,225.00**
(Total of this page)
Total > **6,837.00**

Sheet 2 of 2 continuation sheets attached
to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (12/07)

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

- ☐ 11 U.S.C. §522(b)(2)
☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u>			
Great Lakes Credit Union Savings Account	735 ILCS 5/12-1001(b)	62.00	62.00
<u>Security Deposits with Utilities, Landlords, and Others</u>			
Security Deposit	735 ILCS 5/12-1001(b)	550.00	950.00
<u>Household Goods and Furnishings</u>			
T.V., Furniture	735 ILCS 5/12-1001(b)	1,500.00	3,000.00
<u>Wearing Apparel</u>			
Normal Apparel	735 ILCS 5/12-1001(a)	800.00	800.00
<u>Furs and Jewelry</u>			
Furs, Expensive Clothing and Jewelry	735 ILCS 5/12-1001(b)	800.00	800.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
1992 Mercury Sable Wagon	735 ILCS 5/12-1001(c)	1,225.00	1,225.00

Total: **4,937.00** **6,837.00**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

B6D (Official Form 6D) (12/07)

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor" ,include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		H W J C					
Account No.							
		Value \$					
Account No.							
		Value \$					
Account No.							
		Value \$					
Account No.							
		Value \$					
Subtotal (Total of this page)							
Total (Report on Summary of Schedules)						0.00	0.00

0 continuation sheets attached

B6E (Official Form 6E) (12/07)

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Several Accounts AAC PO Box 2036 28405 Van Dyke Rd. Warren, MI 48093	J	10/06 Collections				1,001.00
Account No. 8488 Advanced Orthopedic Sports Injury 2626 Washington St. Waukegan, IL 60085-4917	J	3/05-7/05 Medical				1,395.00
Account No. 9704200394 Alexian Brothers Medical Center 800 Biesterfield Rd. Elk Grove Village, IL 60007	J	1/98 Medical				72.00
Account No. 854956 Emergency & Ambulatory Alexian Brothers Medical Center 800 Biesterfield Rd. Elk Grove Village, IL 60007	J	0/98 Medical				72.00
Subtotal (Total of this page)						2,540.00

23 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 36206 Anderson Medical Centers LLC 609 Academy Drive Northbrook, IL 60062	J	Medical				40.00
Account No. 900460816 AOL PO Box 30622 Tampa, FL 33630-0622	J	11/05 Collections				100.00
Account No. 5587 Armor Systems 860 Northpoint Blvd., Ste. A Waukegan, IL 60085	J	Collections				2,320.00
Account No. 06-SC-4979 Asset Acceptance PO Box 318035 Independence, OH 44131-8035	J	Judgment				2,207.00
Account No. 33476977-1-R3-R3 Bartlett Library c/o KCA Finance 628 North St., Ste. 200 Geneva, IL 60134-1380	J	Collections				26.00
Sheet no. <u>1</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						4,693.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 9590 Benks Auto Finance, Inc. 2350 W. Byron Ave Chicago, IL 60018	J	1/96 Auto Deficiency 1987 Toyota Previa MVP				2,892.00
Account No. 91381517-02 Brookfield Clams System Unknown	J	Collections				13.00
Account No. 4388-6418-6467-5702 28617479 Capital One P.O. Box 85015 Richmond, VA 23285-5075	J	2/01 - 2/07 Collections				928.00
Account No. 04124-00130 Centegra Northern Illinois Med. Ctr PO Box 1447 Woodstock, IL 60098	J	Medical				1,992.00
Account No. 1341273 Central Dupage Hospital PO Box 4698 Carol Stream, IL 60197-4698	J	1/98 Medical				151.00
Sheet no. 2 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 5,976.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Marmc010 Chest & Sleep Medicine Assoc 1445 Hunt Club Rd Suite 102 Gurnee, IL 60031	J	1/06-5/06 Medical				469.00
Account No. 12033-ja Children's Learning World c/o Medical Business Bureau PO Box 1219 Park Ridge, IL 60068-7219	J	1/98 Collections				372.00
Account No. 4128330892451 Citi c/o Citi Corp. PO Box 6500 Sioux Falls, SD 57117-6500	J	Purchases				1,533.00
Account No. 1001042197 College of Lake c/o Armor Systems 1700 Kiefer Drive, Suite 1 Zion, IL 60099	J	8/00 - 1/02 Collections				191.00
Account No. 1080967823 Comcast c/o Credit Protection assoc, L.P. 13355 Noel Road Dallas, TX 75240	J	Collections				250.00
Sheet no. <u>3</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,815.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		Medical				
Comprehensive Psychiatric Services Unknown	J					200.00
Account No. 1592452		Medical				
Condell 2731 Milwaukee Ave Libertyville, IL 60048	J					100.00
Account No. 976269 190000002879094		Medical				
Condell Medical 900 Garfield Libertyville, IL 60048	J					658.00
Account No. MARMI-0028		Services				
Continental Leavitt Communications Unknown	J					125.00
Account No. 6789841 595455		Collections				
Culligan Water c/o Harvard Collections 4839 N Elston Chicago, IL 60630	J					392.00
Sheet no. 4 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						1,475.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 6210786 CVS Drug Store c/o ClearCheck Payment Solutions PO Box 27087 Greenville, SC 29616-2087	J	12/07 Return Ck#119				112.00
Account No. Direct Loan Servicing Center PO Box 4609 Utica, NY 13504-4609	J	Loan				3,659.00
Account No. 52 Doc's Drugs Unknown	J	3/97 Medical				131.00
Account No. 3410002319711 Dominicks c/o TRS Recovery Services PO Box 4812 Houston, TX 77210	J	Collections				227.00
Account No. 261900 Dr. Economos Unknown	J	1/98 Medical				150.00
Sheet no. 5 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						4,279.00
Subtotal (Total of this page)						4,279.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 2631462-036 14656	J		1/98 Collections				45.00
Dr. Jurcik c/o Northern Credit Service Unknown							
Account No. 2594	J		1/98 Medical				140.00
Dr. Lam Unknown							
Account No. 446527	J		5/96 Medical				272.00
Elmhurst Clinic 75 Remittance Drive Suite 1253 Chicago, IL 60675-1253							
Account No. 163101	J		Collections				150.00
Elmhurst Hospital c/o KCA Finance 628 North St., Ste. 200 Geneva, IL 60134-1380							
Account No. 961440516 8889745174	J		5/96 Medical				700.00
Elmhurst Memorial Hospital PO Box 92348 Chicago, IL 60675-2348							
Sheet no. 6 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)			1,307.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 961440515 Elmhurst Memorial Hospital PO Box 92348 Chicago, IL 60675-2348	J	6/96 Medical				1,130.00
Account No. 12242 0028599 Elmhurst Memorial Hospital PO Box 92348 Chicago, IL 60675-2348	J	1/96 Medical				47.00
Account No. 07 CM 2744 Elnora Palaganas c/o Magee, Negele & Assoc., PC 444 North Cedar Lake Road Round Lake, IL 60073	J	12/07-1/08 Judgment				4,322.00
Account No. 554558672 Emils Pizza c/o Check Rite Unknown	J	Collections				25.00
Account No. 1268900 Family Dental Center/Sears Unknown	J	Medical				142.00
Sheet no. <u>7</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 5,666.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 10847 603810-000-0037022455 Family Practice Center of Palatine, 371 W. Northwest Highway Palatine, IL 60067	J	1/98 Medical				94.00
Account No. 467369466903 First US Bank c/o Capital Acquisitions & Manageme PO Box 158 Sycamore, IL 60178	J	7/02 Collections				3,412.00
Account No. APA340MJF6 Ford Motor Credit Company Central Collections 9700 Higgins Rd., Ste #120 Rosemont, IL 60018	J	2/99 Auto Deficiency 1993 Ford Aerostar				9,652.00
Account No. 58191106 Forest City Auto Parts c/o Equifax Risk Management Service PO Box 9516 Buffalo, NY 14228-9516	J	Collections				25.00
Account No. 54849050 S01 Great Lakes Credit Union 2525 Green Bay Road North Chicago, IL 60064	J	1/08 Overdraft				250.00
Sheet no. 8 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						13,433.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 482A08106 Great Lakes Readers Service Unknown	J	Purchases				366.00
Account No. MB3486-3330-15135 Green Tree Animal Hospital c/o Medical Business Bureau, LLC PO Box 1219 Park Ridge, IL 60068-7219	J	Collections				83.00
Account No. 410544131 Greenspan, MD c/o The Bureau 1717 Central St. Evanston, IL 60204	J	Collections				275.00
Account No. 051-80-0543 Guaranty Bank 4000 West Brown Deer Road Milwaukee, WI 53209	J	Purchases				749.00
Account No. 3319815 Guaranty Bank 4000 West Brown Deer Road Milwaukee, WI 53209	J	Collections				907.00
Sheet no. <u>9</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						2,380.00
Subtotal (Total of this page)						2,380.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 3299399 Guaranty Bank-Checking c/o Professional Acct. Mgmt, LLC. PO Box 391 Milwaukee, WI 53201-0391	J	2/07 Collections				749.00
Account No. 63362266 8094035451 Harris Bank Bankruptcy Department 150 W. Wilson Palatine, IL 60067	J	11/03 - 2/07 Collections				114.00
Account No. 23702202 1035335 34327114 Hoffman Estates Med Center c/o Equifax Risk Management Service PO Box 9516 Buffalo, NY 14228-9516	J	Collections				230.00
Account No. 2370220331304 Hoffman Estates Med Center Unknown	J	1/98 Medical				230.00
Account No. 4154-3300-1236-1744 Home Federal Visa Unknown	J	Purchases				497.00
Sheet no. <u>10</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,820.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 12577.0 Illinois Pain Treatment Unknown	J	Medical				114.00
Account No. 60799 Jensen Disposal PO Box 415 Mundelein, IL 60060	J	2/06-1/08 Services				118.00
Account No. 50251743 6200869 K Mart c/o Certegy Payment Recovery Servic 11601 Roosevelt Blvd Saint Petersburg, FL 33716	J	1/08 Collections Return Ck#117				210.00
Account No. 2SC-0001907 Kirby Cleanings System Unknown, IL	J	6/02 Judgment				2,495.00
Account No. 35088418 Lake Forest Hospital 660 N. Westmoreland Rd. Lake Forest, IL 60045-9989	J	Medical				445.00
Sheet no. <u>11</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						3,382.00
Subtotal (Total of this page)						3,382.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 32831 Lake Forest Pediatric Assoc., LTD 900 N. Westmoreland Suite #110 Lake Forest, IL 60045	J	Medical				134.00
Account No. 1020 Law Offices of Peter S. Stamatis Chicago Mercantile Exchange Bldg. 30 S. Wacker Drive, Suite 1413 Chicago, IL 60606	J	1996 Tickets				1,318.00
Account No. 667480 Lion Video 3300 Chicago Rd. S. Chicago Heights, IL 60475	J	12/96 Purchases				36.00
Account No. 1020130 Lutheran General Hospital 1775 Dempster Park Ridge, IL 60068	J	10/96 Medical				505.00
Account No. 1595479 Lutheran General Hospital 1775 Dempster Park Ridge, IL 60068	J	3/95 Medical				607.00
Sheet no. 12 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						2,600.00
Subtotal (Total of this page)						2,600.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 10959241 Lutheran General Hospital 1775 Dempster Park Ridge, IL 60068	J	1/98 Medical				142.00
Account No. 10822621 Lutheran General Hospital 1775 Dempster Park Ridge, IL 60068	J	7/96 Medical				330.00
Account No. 159769 M.C.C. PO Box 538 Eau Claire, WI 54702-0538	J	Collections				1,098.00
Account No. 10795919 Malcolm S. Gerald & Assoc. 332 S. Michigan Ave., Ste. 600 Chicago, IL 60604	J	7/96 Collections				742.00
Account No. 30327114 Malcolm S. Gerald & Assoc. 332 S. Michigan Ave., Ste. 600 Chicago, IL 60604	J	1/97 Collections				50.00
Sheet no. <u>13</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						2,362.00
Subtotal (Total of this page)						2,362.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. Estate of Gwendolyn M Arends	J	2/05 Services				369.00
Marilyn Miller Attorney at Law One Tower Lane, Ste 1700, PMB 110 Oakbrook Terrace, IL 60181						
Account No. 3-776-570-752-10	J	1/98 Purchases				488.00
Marshall Fields 300 Sheffield Center Lorain, OH 44055						
Account No. 06-840 06 SC 4979	J	7/06 Judgment				2,407.00
Marshall Fields/Asset Acceptance c/o Gary Underwood 515 Olive St., Ste. 800 Saint Louis, MO 63101						
Account No. MA9957AOI/8488	J	Collections				1,395.00
Medical Business Bureau, LLC PO Box 1219 Park Ridge, IL 60068-7219						
Account No. 11074	J	Medical				122.00
Metro Square Dental Associates 10 Phillip Road Vernon Hills, IL 60061						
Sheet no. <u>14</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			4,781.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 3896 Midwest Children's Heart Specialist 1575 N. Barrington, Ste. 430 Schaumburg, IL 60194	J	Medical				150.00
Account No. 70578 Min H Lin MD Ltd ML Medical Billing Co. 425 Huehl Road, Bldg 8 Northbrook, IL 60062	J	1/08 Medical				90.00
Account No. 02 SC 1907 Neuro-Spinal Center, Ltd c/o Edgerton & Edgerton 125 Wood St., West Chicago, IL 60186-0218	J	9/02 Jugment				2,795.00
Account No. 55-28-21-1325-1 Nicor Gas P.O. Box 549 Aurora, IL 60507	J	10/06 Services				12,812.00
Account No. 5528211668 Nicor Gas P.O. Box 549 Aurora, IL 60507	J	Services				1,107.00
Sheet no. <u>15</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 16,954.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. S6660253-MW	J	Collections				63.00
North Arlington Pediatrics c/o IC Systems PO Box 64378 Saint Paul, MN 55164						
Account No. 1855241	J	1/98 Medical				365.00
Northwest Community Hospital 800 W. Central Rd. Arlington Heights, IL 60005						
Account No. 35865	J	2/97 Medical				39.00
Northwest Health Care Assocs. 2360 Hassell Rd., Ste. F Hoffman Estates, IL 60195-2171						
Account No. 51664	J	1/98 Medical				45.00
Northwest Health Care Assocs. 2360 Hassell Rd., Ste. F Hoffman Estates, IL 60195-2171						
Account No.	J	1/98 Medical				2,220.00
obgyn Unknown						
Sheet no. <u>16</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						2,732.00
Subtotal (Total of this page)						2,732.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 189945	J	Collections				92.00
OBGYN of Lake Forest c/o AR Concepts 33 W Higgins Rd, Ste 715 South Barrington, IL 60010						
Account No. 2005-CF-001580	J	2005 Civil Restitution				15,000.00
People of the State of Illinois c/o DuPage County Probation Departm 503 N County Farm Road Wheaton, IL 60187-3907						
Account No. 5500002531717	J	Services				184.00
Peoples Energy 130 E. Randolph Drive Chicago, IL 60601						
Account No. MCD1004014A14	J	Collections				193.00
Quest Diagnostics c/o AMCA 2269 S. Saw Mill River Rd., Bldg. 3 Elmsford, NY 10523						
Account No. V00016112639	J	Medical				1,430.00
Rehabilitation Institute of Chicago 1030 N. Clark St., #500 Chicago, IL 60610						
Sheet no. 17 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			16,899.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 13513 Riverside Medical 3405 N. Arlington Heights Rd. Arlington Heights, IL 60004	J	Medical				310.00
Account No. 06-LM-2299 Robert Crides 105 Coldren Prospect Heights, IL 60070	J	10-12-06 Complaint in Forcible Entry and Detainer				8,335.00
Account No. 1816113003302317 Safeway c/o Check Recovery PO Box 45405 Los Angeles, CA 90045-0405	J	Collections				226.00
Account No. Sallie Mae PO Box 4100 Wilkes Barre, PA 18773	J	Student Loan				1,313.00
Account No. Sallie Mae PO Box 4100 Wilkes Barre, PA 18773	J	Student Loan				2,000.00
Sheet no. 18 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 12,184.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 4146-8300-0815-3212 Salute Visa Cardholder Services Dispute Resolut PO Box 105374 Atlanta, GA 30348-5374	J	1/08 Purchases				876.00
Account No. 4146-8300-0815-3220 Salute Visa Cardholder Services Dispute Resolut PO Box 105374 Atlanta, GA 30348-5374	J	12/07 Purchases				639.00
Account No. 84774094506834 SBC Bill Payment Center Chicago, IL 60663	J	8/05 Services				314.00
Account No. SBC-8478378643174 SBC Bill Payment Center Chicago, IL 60663	J	Collections				755.00
Account No. 2455 SBC c/o Asset Acceptance LLC PO Box 2036 Warren, MI 48090-2036	J	Collections				247.00
Sheet no. 19 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						2,831.00
Subtotal (Total of this page)						2,831.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 154719 DE0011086361	J	Collections				300.00
Senex Service Corp. 1574 Monamentum Place Chicago, IL 60689-5315						
Account No. 2090626/ 9117060	J	Collections				35.00
St. Therese Radiology Assoc c/o Nationwide Credit Unknown						
Account No.	J	Purchases				100.00
Steven Coen Unknown						
Account No. MA9957SMA	J	Collections				162.00
Suburban Medical c/o Medical Business Bureau, LLC PO Box 1219 Park Ridge, IL 60068-7219						
Account No. 3-776-570-752-90	J	1/98 Purchases				433.00
Target 700 on the Mall Minneapolis, MN 55402-2065						
Sheet no. <u>20</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,030.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 3-776-570-752	J	Purchases				787.00
Target/Marshall Fields c/o Retail Services PO Box 17602 Baltimore, MD 21297-1602						
Account No.	J	Collections				1,500.00
Unifund Co 10625 Techwoods Circle Cincinnati, OH 45242						
Account No. 63362266	J	Collections				1,820.00
United Consumers Unknown						
Account No.	J	Student Loan				2,886.00
United Student Aid Funds PO Box 6180 MC 8340 Indianapolis, IN 46206-6180						
Account No. 128636784	J	9/94 Medical				122.00
University of Chicago 5801 S. Ellis Ave. Chicago, IL 60637						
Sheet no. <u>21</u> of <u>23</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			7,115.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		2/04 - 12/06 Student Loan				
US Department of Education PO Box 7202 Utica, NY 13504-7202	J					3,659.00
Account No. 47977		1/98 Services				
Village of Arlington Heights 33 S. Arlington Heights Rd. Arlington Heights, IL 60005	J					100.00
Account No. P5009050		1/98 Ticket				
Village of Bartlett Unknown	J					30.00
Account No. 1646738		11/07 Medical				
Vista Medical Center East PO Box 504316 Saint Louis, MO 63150-4316	J					18,100.00
Account No.		Collections				
Walgreens c/o Continental Collection Bureau Unknown	J					66.00
Sheet no. 22 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						21,955.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 174 36-2480097	J	1/98 Services				305.00
Walter Hofman Unknown						
Account No. 313160319-YS 20131850182211	J	1/08 Collections				176.00
Waste Management c/o DUNSDemand 4836 Brecksville Rd. Richfield, OH 44286						
Account No.						
Account No.						
Account No.						
Sheet no. 23 of 23 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						481.00
Subtotal (Total of this page)						
Total (Report on Summary of Schedules)						141,690.00

AAC
PO Box 2036
28405 Van Dyke Rd.
Warren, MI 48093

Advanced Orthopedic Sports Injury
2626 Washington St.
Waukegan, IL 60085-4917

Alexian Brothers Medical
c/o Tintari Riebe Service

Alexian Brothers Medical Center
800 Biesterfield Rd.
Elk Grove Village, IL 60007

Anderson Medical Centers LLC
609 Academy Drive
Northbrook, IL 60062

AOL
PO Box 30622
Tampa, FL 33630-0622

Armor Systems
860 Northpoint Blvd., Ste. A
Waukegan, IL 60085

Asset Acceptance
PO Box 318035
Independence, OH 44131-8035

Bartlett Library
c/o KCA Finance
628 North St., Ste. 200
Geneva, IL 60134-1380

Benks Auto Finance, Inc.
2350 W. Byron Ave
Chicago, IL 60018

Brookfield Clams System
Unknown

Capital One
P.O. Box 85015
Richmond, VA 23285-5075

Capital One
c/o Arrow Financial Services
5996 Touhy Ave
Niles, IL 60714

Centegra Northern Illinois Med. Ctr
PO Box 1447
Woodstock, IL 60098

Central Dupage Hospital
PO Box 4698
Carol Stream, IL 60197-4698

Chest & Sleep Medicine Assoc
1445 Hunt Club Rd
Suite 102
Gurnee, IL 60031

Children's Learning World
c/o Medical Business Bureau
PO Box 1219
Park Ridge, IL 60068-7219

Citi
c/o Citi Corp.
PO Box 6500
Sioux Falls, SD 57117-6500

College of Lake
c/o Armor Systems
1700 Kiefer Drive, Suite 1
Zion, IL 60099

Comcast
c/o Credit Protection assoc, L.P.
13355 Noel Road
Dallas, TX 75240

Comprehensive Psychiatric Services
Unknown

Condell
2731 Milwaukee Ave
Libertyville, IL 60048

Condell Medical
900 Garfield
Libertyville, IL 60048

Condell Medical Center
c/o Malcolm S. Gerald and Ass., Inc
332 South Michigan Avenue Suite 600
Chicago, IL 60604

Continental Leavitt Communications
Unknown

Culligan Water
c/o Harvard Collections
4839 N Elston
Chicago, IL 60630

CVS Drug Store
c/o ClearCheck Payment Solutions
PO Box 27087
Greenville, SC 29616-2087

Direct Loan Servicing Center
PO Box 4609
Utica, NY 13504-4609

Doc's Drugs
Unknown

Dominicks
c/o TRS Recovery Services
PO Box 4812
Houston, TX 77210

Dr. Economos
Unknown

Dr. Jurcik
c/o Northern Credit Service
Unknown

Dr. Lam
Unknown

Elmhurst Clinic
75 Remittance Drive
Suite 1253
Chicago, IL 60675-1253

Elmhurst Hospital
c/o KCA Finance
628 North St., Ste. 200
Geneva, IL 60134-1380

Elmhurst Memorial Hospital
PO Box 92348
Chicago, IL 60675-2348

Elnora Palaganas
c/o Magee, Negele & Assoc., PC
444 North Cedar Lake Road
Round Lake, IL 60073

Emils Pizza
c/o Check Rite
Unknown

Family Dental Center/Sears
Unknown

Family Practice Center of Palatine,
371 W. Northwest Highway
Palatine, IL 60067

FCC National/Gary Wheaton Bank
c/o Mitchell N. Kay
Unknown

First US Bank
c/o Capital Acquisitions & Manageme
PO Box 158
Sycamore, IL 60178

First US Bank
Camco
228 Page Street
Sycamore, IL 60178

Ford Motor Credit Company
Central Collections
9700 Higgins Rd., Ste #120
Rosemont, IL 60018

Ford Motor Credit Company
2500 W Higgins Road
Suite 280
Hoffman Estates, IL 60195-2008

Ford Motor Credit Company
c/o Bowman, Heintz, Boscia & Vician
8605 Broadway
Merrillville, IN 46410

Forest City Auto Parts
c/o Equifax Risk Management Service
PO Box 9516
Buffalo, NY 14228-9516

Great Lakes Credit Union
2525 Green Bay Road
North Chicago, IL 60064

Great Lakes Readers Service
Unknown

Green Tree Animal Hospital
c/o Medical Business Bureau, LLC
PO Box 1219
Park Ridge, IL 60068-7219

Greenspan, MD
c/o The Bureau
1717 Central St.
Evanston, IL 60204

Guaranty Bank
4000 West Brown Deer Road
Milwaukee, WI 53209

Guaranty Bank-Checking
c/o Professional Acct. Mgmt, LLC.
PO Box 391
Milwaukee, WI 53201-0391

Harris Bank
Bankruptcy Department
150 W. Wilson
Palatine, IL 60067

Hoffman Estate Med Center
c/o Malcom S. Gerald & Assoc, Inc.
332 S. Michigan Ave., Ste 600
Chicago, IL 60604

Hoffman Estates Med Center
c/o Equifax Risk Management Service
PO Box 9516
Buffalo, NY 14228-9516

Hoffman Estates Med Center
Unknown

Home Federal Visa
Unknown

Illinois Pain Treatment
Unknown

Jensen Disposal
PO Box 415
Mundelein, IL 60060

K Mart
c/o Certegy Payment Recovery Servic
11601 Roosevelt Blvd
Saint Petersburg, FL 33716

K Mart
c/o Wexler and Wexler
500 West Madison Street Suite 2910
Chicago, IL 60661-2587

Kirby Cleanings System
Unknown, IL

Lake Forest Hospital
660 N. Westmoreland Rd.
Lake Forest, IL 60045-9989

Lake Forest Pediatric Assoc., LTD
900 N. Westmoreland
Suite #110
Lake Forest, IL 60045

Law Offices of Peter S. Stamatis
Chicago Mercantile Exchange Bldg.
30 S. Wacker Drive, Suite 1413
Chicago, IL 60606

Lion Video
3300 Chicago Rd.
S. Chicago Heights, IL 60475

Lutheran General Hospital
1775 Dempster
Park Ridge, IL 60068

M.C.C.
PO Box 538
Eau Claire, WI 54702-0538

Malcolm S. Gerald & Assoc.
332 S. Michigan Ave., Ste. 600
Chicago, IL 60604

Marilyn Miller
Attorney at Law
One Tower Lane, Ste 1700, PMB 110
Oakbrook Terrace, IL 60181

Marshall Fields
300 Sheffield Center
Lorain, OH 44055

Marshall Fields/Asset Acceptance
c/o Gary Underwood
515 Olive St., Ste. 800
Saint Louis, MO 63101

Medical Business Bureau, LLC
PO Box 1219
Park Ridge, IL 60068-7219

Metro Square Dental Associates
10 Phillip Road
Vernon Hills, IL 60061

Midwest Children's Heart Specialist
1575 N. Barrington, Ste. 430
Schaumburg, IL 60194

Min H Lin MD Ltd
ML Medical Billing Co.
425 Huehl Road, Bldg 8
Northbrook, IL 60062

Neuro-Spinal Center, Ltd
c/o Edgerton & Edgerton
125 Wood St.,
West Chicago, IL 60186-0218

Nicor Gas
P.O. Box 549
Aurora, IL 60507

North Arlington Pediatrics
c/o IC Systems
PO Box 64378
Saint Paul, MN 55164

Northwest Community Hospital
800 W. Central Rd.
Arlington Heights, IL 60005

Northwest Health Care Assocs.
2360 Hassell Rd., Ste. F
Hoffman Estates, IL 60195-2171

obgyn
Unknown

OBGYN of Lake Forest
c/o AR Concepts
33 W Higgins Rd, Ste 715
South Barrington, IL 60010

People of the State of Illinois
c/o DuPage County Probation Departm
503 N County Farm Road
Wheaton, IL 60187-3907

Peoples Energy
130 E. Randolph Drive
Chicago, IL 60601

Quest Diagnostics
c/o AMCA
2269 S. Saw Mill River Rd., Bldg. 3
Elmsford, NY 10523

Rehabilitation Institute of Chicago
1030 N. Clark St., #500
Chicago, IL 60610

Riverside Medical
3405 N. Arlington Heights Rd.
Arlington Heights, IL 60004

Robert Crides
105 Coldren
Prospect Heights, IL 60070

Safeway
c/o Check Recovery
PO Box 45405
Los Angeles, CA 90045-0405

Sallie Mae
PO Box 4100
Wilkes Barre, PA 18773

Salute Visa
Cardholder Services Dispute Resolut
PO Box 105374
Atlanta, GA 30348-5374

Salute Visa
PO Box 105555
Atlanta, GA 30348-5555

SBC
Bill Payment Center
Chicago, IL 60663

SBC
c/o Asset Acceptance LLC
PO Box 2036
Warren, MI 48090-2036

Senex Service Corp.
1574 Monamentum Place
Chicago, IL 60689-5315

St. Therese Radiology Assoc
c/o Nationwide Credit
Unknown

Steven Coen
Unknown

Suburban Medical
c/o Medical Business Bureau, LLC
PO Box 1219
Park Ridge, IL 60068-7219

Target
700 on the Mall
Minneapolis, MN 55402-2065

Target/Marshall Fields
c/o Retail Services
PO Box 17602
Baltimore, MD 21297-1602

Unifund Co
10625 Techwoods Circle
Cincinnati, OH 45242

United Consumers
Unknown

United Student Aid Funds
PO Box 6180
MC 8340
Indianapolis, IN 46206-6180

University of Chicago
5801 S. Ellis Ave.
Chicago, IL 60637

US Department of Education
PO Box 7202
Utica, NY 13504-7202

Village of Arlington Heights
33 S. Arlington Heights Rd.
Arlington Heights, IL 60005

Village of Bartlett
Unknown

Vista Medical Center East
PO Box 504316
Saint Louis, MO 63150-4316

Walgreens
c/o Continental Collection Bureau
Unknown

Walter Hofman
Unknown

Waste Management
c/o DUNSDEMAND
4836 Brecksville Rd.
Richfield, OH 44286

Zenith Acquisition Corp. (SBC-2302)
220 John Glenn Drive, Ste. One
Buffalo, NY 14228

B6G (Official Form 6G) (12/07)

In re

Daniel P. Marchese,
Michele L. Marchese

Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
John Allen UNKNOWN	Lease Yearly Expires 11/09

B6H (Official Form 6H) (12/07)

In re **Daniel P. Marchese,
Michele L. Marchese**

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

continuation sheets attached to Schedule of Codebtors

B6I (Official Form 6I) (12/07)

In re **Daniel P. Marchese**
Michele L. Marchese

Case No. _____

Debtor(s) _____

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
Married	RELATIONSHIP(S): Daughter Son	AGE(S): 10 12
Employment:	DEBTOR	SPOUSE
Occupation	Unemployed	Medical Assistant
Name of Employer	Unemployed	Dr. Neda Tkalcovic
How long employed		1 year & 7 months
Address of Employer		30 Tower Court, Ste. C Gurnee, IL 60031

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)

2. Estimate monthly overtime

3. SUBTOTAL

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

b. Insurance

c. Union dues

d. Other (Specify): _____

5. SUBTOTAL OF PAYROLL DEDUCTIONS

6. TOTAL NET MONTHLY TAKE HOME PAY

7. Regular income from operation of business or profession or farm (Attach detailed statement)

8. Income from real property

9. Interest and dividends

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

11. Social security or government assistance

(Specify): _____

12. Pension or retirement income

13. Other monthly income

(Specify): _____

14. SUBTOTAL OF LINES 7 THROUGH 13

15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

DEBTOR	SPOUSE
\$ 0.00	\$ 2,271.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 2,271.00
\$ 0.00	\$ 250.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 250.00
\$ 0.00	\$ 2,021.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
\$ 0.00	\$ 2,021.00
\$ 2,021.00	

In re **Daniel P. Marchese**
Michele L. Marchese

Case No. _____

Debtor(s) _____

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	950.00
a. Are real estate taxes included? Yes _____ No <u>X</u>		
b. Is property insurance included? Yes _____ No <u>X</u>		
2. Utilities:	\$	80.00
a. Electricity and heating fuel	\$	40.00
b. Water and sewer	\$	34.00
c. Telephone	\$	168.00
d. Other <u>See Detailed Expense Attachment</u>	\$	50.00
3. Home maintenance (repairs and upkeep)	\$	389.00
4. Food	\$	50.00
5. Clothing	\$	0.00
6. Laundry and dry cleaning	\$	20.00
7. Medical and dental expenses	\$	170.00
8. Transportation (not including car payments)	\$	0.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	70.00
e. Other _____	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other _____	\$	0.00
c. Other _____	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other _____	\$	0.00
Other _____	\$	0.00

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$	2,021.00
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19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	2,021.00
b. Average monthly expenses from Line 18 above	\$	2,021.00
c. Monthly net income (a. minus b.)	\$	0.00

B6J (Official Form 6J) (12/07)

In re **Daniel P. Marchese**
Michele L. Marchese

Debtor(s)

Case No. _____

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)
Detailed Expense Attachment

Other Utility Expenditures:

Cell Phone	\$	100.00
Cable T.V.	\$	34.00
Internet Access	\$	34.00
Total Other Utility Expenditures	\$	168.00

United States Bankruptcy Court
Northern District of Illinois

In re **Daniel P. Marchese**
Michele L. Marchese

Debtor(s)

Case No.
Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **38** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **July 23, 2008**

Signature **/s/ Daniel P. Marchese**
Daniel P. Marchese
Debtor

Date **July 23, 2008**

Signature **/s/ Michele L. Marchese**
Michele L. Marchese
Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (12/07)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Daniel P. Marchese
Michele L. Marchese**

Debtor(s)

Case No.
Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$0.00	2008 Husband
\$13,353.00	2008 Wife
\$0.00	2007 Husband
\$28,000.00	2007 Wife
\$0.00	2006 Husband
\$26,872.00	2006 Wife

2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
--------	--------

3. Payments to creditors

None ☒ *Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Ford Motor Credit v. Daniel & Michele Marches	Judgment	Unknown	Unknown
Neuro Spinal Center v. Daniel & Michele Marchese	Judgment	Unknown	Unknown
Marshall Fields v. Daniel & Michele Marchese 06 SC 4979	Judgment	19th Judicial Circuit Lake County	Pending

CAPTION OF SUIT AND CASE NUMBER Kirby Vacuums v. Daniel & Michele Marchese	NATURE OF PROCEEDING Judgment	COURT OR AGENCY AND LOCATION Unknown	STATUS OR DISPOSITION Unknown
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2SC0001907

Robert Cordes v. Daniel & Michele Marchese 06 LM 2299	Complaint in Forcible Entry and Detainer	Circuit Court of the Nineteenth Judicial Circuit Lake County, Illinois	Pending
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Elnora Palaganas vs. Daniel & Michelle Marchese 07 CM 2744	Judgment	19th Judicial Circuit Lake County, IL	Pending
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None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
---	-----------------	--------------------------------------

5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
---	--	--------------------------------------

6. Assignments and receiverships

None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	--	------------------	--------------------------------------

7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090	2/17/09 - 7/11/08	\$801.00

10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Unknown 26284 N. Route 83 #16 Mundelein, IL 60060 Unknown		Mobile Home No money, recipient paid the balance of mortgage

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
24565 Oak Street Round Lake, IL 60073	Same	10/03 - 11/06

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18. Nature, location and name of business

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Marchese's Italian Catering		26284 N. Route 83 Mundelein, IL 60060	Italian Catering	2000 - present

- None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date **July 23, 2008**

Signature **/s/ Daniel P. Marchese**
Daniel P. Marchese
Debtor

Date **July 23, 2008**

Signature **/s/ Michele L. Marchese**
Michele L. Marchese
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Form 8
(10/05)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Daniel P. Marchese
Michele L. Marchese**

Debtor(s)

Case No.

Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- ☐ I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
- ☒ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
- ☒ I intend to do the following with respect to property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
-NONE-					

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)
Lease Yearly Expires 11/09	John Allen	X

Date **July 23, 2008**

Signature **/s/ Daniel P. Marchese**
Daniel P. Marchese
Debtor

Date **July 23, 2008**

Signature **/s/ Michele L. Marchese**
Michele L. Marchese
Joint Debtor

United States Bankruptcy Court
Northern District of Illinois

In re **Daniel P. Marchese**
Michele L. Marchese

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u>801.00</u>
Prior to the filing of this statement I have received.....	\$	<u>801.00</u>
Balance Due.....	\$	<u>0.00</u>

2. The source of the compensation paid to me was:



Debtor



Other (specify):

3. The source of compensation to be paid to me is:



Debtor



Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.



I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances (except in Chapter 13 cases), or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: July 23, 2008

/s/ David M. Siegel

David M. Siegel
David M. Siegel & Associates
790 Chaddick Drive
Wheeling, IL 60090
(847) 520-8100

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

David M. Siegel

Printed Name of Attorney
Address:
790 Chaddick Drive
Wheeling, IL 60090
(847) 520-8100

X **/s/ David M. Siegel** _____
Signature of Attorney Date

Certificate of Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Daniel P. Marchese
Michele L. Marchese

Printed Name of Debtor

X **/s/ Daniel P. Marchese** _____
Signature of Debtor Date

Case No. (if known) _____

X **/s/ Michele L. Marchese** _____
Signature of Joint Debtor (if any) Date

STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. §341

INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Trustee, United States Department of Justice, has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of...

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This information sheet contains only general principles of law and is not a substitute for legal advice. If you have questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed on your bankruptcy schedules. A discharge is a court order that says you do not have to repay your debts, but there are a number of exceptions. Debts which may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to pay any debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying any debts that were not listed on your bankruptcy schedules or that you incurred after you filed for bankruptcy.

WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document, which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court within 60 days after the first meeting of the creditors.

Reaffirmation agreements are strictly voluntary — they are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues your discharge order or within sixty (60) days after the reaffirmation agreement was filed with the court, whichever is later. If you reaffirm a debt and fail to make the payments required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any remaining debt.

OTHER BANKRUPTCY OPTIONS

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtor's farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtor must pay the chapter 13 trustee the amounts set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,000,000 (\$250,000 in unsecured debts and \$750,000 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

/s/ Daniel P. Marchese

Debtor's Signature

July 23, 2008

Date

/s/ Michele L. Marchese

Joint Debtor's Signature

July 23, 2008

Date

**United States Bankruptcy Court
Northern District of Illinois**

In re **Daniel P. Marchese**
Michele L. Marchese Debtor(s) Case No. _____
Chapter **7**

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **114**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **July 23, 2008** **/s/ Daniel P. Marchese**
Daniel P. Marchese
Signature of Debtor

Date: **July 23, 2008** **/s/ Michele L. Marchese**
Michele L. Marchese
Signature of Debtor